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CONFIRMATION NO. 4903

SERIAL NUMBER 10/762,407	FILING DATE 01/22/2004  RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. 1-24313
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/450,786 02/28/2003

O.K. R.S.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none R.S.

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		
Verified and Acknowledged				

## ADDRESS

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## TITLE

Assist handle assembly for beds

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other
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